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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : DAKOTA ACCOUNTING SERVICES INC.

Account Number : I20160000034

Phone

: (786)650-1600

Fax Number

: (786)650-1601

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## FLORIDA PROFIT/NON PROFIT CORPORATION GARCIA LANDSCAPING OF FL, INC.

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## COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: GARCL	A LANDSCAPING OF FL, INC		
	(PROPOSED CORPOR	ATE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l a check for:
☐ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Ccrtified Copy	S87.50 Filing Fcc, Certified Copy & Certificate o Status
		ADDITIONAL CO	PY REQUIRED
FROM:	UARDO P GARCIA VALDIVIA Nam	e (Printed or typed)	
2079	OI SW 207 AVENUE		
		Address	
MIA	MI, FL 33187		
	City,	State & Zip	
305	417 2692		
	Daytime T	elephone number	
2020	TAXDATA@GMAIL.COM		
	E-mail address: (to be use	d for future annual report n	otification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

RTICLE I NAN he name of the corpo	GARCIA LANDSCAPING	OF FL, INC	
RTICLE II PRINCIPAL OFFICE  Principal street address 0791 SW 207 AVENUE		Mailing address, if different is:	
IAMI, FL 33187			
Description	POSE h the corporation is organized is:	O ALL LAWFULL BUSINE	SS
RTICLE IV SHA e number of shares	of stock is:	———	
Name and Ti Address	20791 SW 207 AVENUE	Name and Title:	
Addices	MIAMI, FL 33187	Address:	
N (m)			19
Address			MAY 2
Name and Titl	c:	Nome and Title:	8
Address		Address:	
		<del></del>	

Name a	and Title:	Name and Title:	
Addres	ss	Address:	
•			
ARTICLE VI	REGISTERED AGENT		·
Name:	Florida street address (P.O. Box NOT acceptable INNAZ PRO SERVICE INC	) of the registered agent is:	19
Address:	13501 SW 128TH ST SUITE 217	<del>_</del> _	HAY
	MIAMI, FL 33186		AY 24 A
<u>ARTICLE VII</u>	INCORPORATOR		
The name and a	address of the Incorporator is:		<u> </u>
Name:	EDUARDO P GARCIA VALDIVIA		
Address:	20791 SW 207 AVENUE	_	
	MIAMI, FL 33187	<del></del>	
Effective date, i (If an effective filing.)  Note: If the dat	f other than the date of filing:  date is listed, the date must be specific and cam  c inserted in this block does not meet the applicable effective date on the Department of State's records	le statutory filing remirements	ior or 90 days after the
Having been na this certificate, I	med as registered agent to accept service of proce am familian with and accept the appointment as r	255 for the above stated corpora registered agent and agree to ac	ct in this capacity
	Required Signature/Registered Agent		05/23/2019
l euhmis ship do		_	Date
document to the	cument and affirm that the facts stated herein ar Department of State constitutes a third degree felo I	e true. I am aware that the fa ony as provided for in s.817.15.	lse information submitted in a 5, F.S.
	NW/ T		05/23/2019
Requ	ired Signature/Incorporator	<del></del>	Date

• • •